

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	8/1
O.I.P.E. CLASSIFIER		8	8-4-90
FORMALITY REVIEW	MH	854	9-12-n
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	1/1/90
1 ✓ /	
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Claim	Date
Final Original	1/1/90
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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